

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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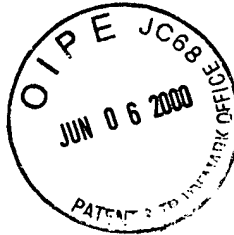
In re the application of:

TOGASHI et al.

Serial Number: 09/518,729

Filed: March 3, 2000

For: DISC CHANER



**ATTN: APPLICATION
BRANCH**

#3

REQUEST FOR CORRECTED FILING RECEIPT

Assistant Commissioner for Patents
Washington, D.C. 20231

June 6, 2000

Dear Sir:

Please supply the undersigned attorney with a corrected filing receipt of the above-identified application.

In reviewing the Official Filing Receipt, we noted an error in the third Inventor's name and also the Foreign Applications date. The name should read as -- **SANTORU ANADA AND THE FOREIGN APPLICATIONS DATE SHOULD READ AS 04/03/1999--**, rather than "SANTORU ANDA AND 03/04/99". We are enclosing a copy of the filing receipt and Declaration with the correction(s) highlighted in yellow.

In the event any fees are due with respect to this paper, please charge our Deposit Account No. 01-2300.

Respectfully submitted,

Arent Fox Kintner Plotkin & Kahn

Douglas H. Goldhush
Registration No. 33,125

TC 2700 MAIL ROOM

JUL 12 2000

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Atty. Docket No. P107156-00001
1050 Connecticut Avenue, N.W.
Suite 600
Washington, D.C. 20036-5339
Tel: (202) 857-6000
DHG:ars

Enclosure: Copy of Filing Receipt and Declaration

CPI

FILING RECEIPT



OC000000005094968

UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark OfficeAddress: ASSISTANT SECRETARY AND
COMMISSIONER OF PATENT AND TRADEMARKS
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/518,729	03/03/2000	2752	690	P7156-00001	12	4	3

Nikado Marmelstein Murray & Oram LLP
Metropolitan Square
655 Fifteenth St NW
Ste 330 G Street Lobby
Washington, DC 20005-5701

Date Mailed: 05/04/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

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Hideki Kinoshita, Saitama-ken, JAPAN;
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Continuing Data as Claimed by Applicant

Foreign Applications

JAPAN 11-56969 03/04/1999

04/03/1999

If Required, Foreign Filing License Granted 05/03/2000

**

Title

Disc Changer

Preliminary Class

369

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Bib Data Sheet



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Address: COMMISSIONER OF PATENTS AND TRADEMARKS
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SERIAL NUMBER 09/518,729	FILING DATE 03/03/2000 RULE	CLASS 369	GROUP ART UNIT 2752	ATTORNEY DOCKET NO. P7156-00001
APPLICANTS Jun Togashi, Saitama-ken, JAPAN; Hideki Kinoshita, Saitama-ken, JAPAN; Satoru Anada, Saitama-ken, JAPAN; Takashi Ota, Saitama-ken, JAPAN; Kiyoshi Morikawa, Saitama-ken, JAPAN; Toshiyuki Sakai, Saitama-ken, JAPAN; Shoichi Naruse, Saitama-ken, JAPAN;				
** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** JAPAN 11-56969 04/03/1999				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 05/03/2000				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY JAPAN	SHEETS DRAWING 12	TOTAL CLAIMS 4
				INDEPENDENT CLAIMS 3
ADDRESS Nikado Marmelstein Murray & Oram LLP Metropolitan Square 655 Fifteenth St NW Ste 330 G Street Lobby Washington ,DC 20005-5701				
TITLE Disc Changer				
FILING FEE RECEIVED 690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	